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Washington, DC 20231  
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CONFIRMATION NO. 5703

Bib Data Sheet

SERIAL NUMBER 09/886,366	FILING DATE 06/22/2001 RULE	CLASS 455	GROUP ART UNIT 2685	ATTORNEY DOCKET NO. 01USFP628-K.N.
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**APPLICANTS**

Taneaki Chiba, Tokyo, JAPAN;

**\*\* CONTINUING DATA \*\*\*\*\***

NONE, M.E.

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

JAPAN 190982/2000 06/26/2000

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 08/15/2001

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 7	TOTAL CLAIMS 25	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

**ADDRESS**

030743

*CRT. update  
12-1-02*

D.J.

**TITLE**

Information distribution system for distributing information by using visual device and electrical device

FILING FEE RECEIVED 800	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
 UNITED STATES PATENT AND TRADEMARK OFFICE  
 WASHINGTON, D.C. 20231  
[www.uspto.gov](http://www.uspto.gov)



Bib Data Sheet

CONFIRMATION NO. 5703

SERIAL NUMBER 09/886,366	FILING DATE 06/22/2001 RULE	CLASS 455	GROUP ART UNIT 2681	ATTORNEY DOCKET NO. 01USFP628-K.N.
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**APPLICANTS**

Taneaki Chiba, Tokyo, JAPAN;

**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\***

JAPAN 190982/2000 06/26/2000

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 08/15/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance		
Verified and Acknowledged	Examiner's Signature _____ Initials _____		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
JAPAN	7	25	3

**ADDRESS**

McGuire Woods  
 1750 Tysons Boulevard, Suite 1800  
 Tysons Corner  
 McLean ,VA 22102-4215

**TITLE**

Information distribution system for distributing information by using visual device and electrical device

FILING FEE RECEIVED 800	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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